EXHIBIT C

FORM B10 (Official Form 10) (10/05)

UNITED STATES BANKRUPICY COURT	Dist	RICT OF Neva	ada	DDOOF OF CLAIM
Name of Debtor USA Commercial Mortgage Company	Case N		- 100	PROOF OF CLAIM
	والمستحدد المستحد المستداريات	36-1072		
NOTE This form should not be used to make a claim for an admin of the case. A request for payment of an administrative expense in				
Name of Creditor (The person or other entity to whom the debtor owes money or property) Steve H Marker & Karen L M, lker 7527 E Jasura D Scotts date, A2 85762 Name and address where notices should be sent	else h your giving	as filed a proof o claim Attach cop g particulars	ware that anyone f claim relating to by of statement never received an	y
Stow Miller	notice	es from the bankr	uptcy court in this	
7537 & Pararo Dr 5 cottsdale, An 85162 Telephone number 480 485 0640	Check addre the co	ss on the envelop ourt		THIS SEACE IS FOR COURT USE ONLY
Last four digits of account or other number by which creditor identifies debtor	1	there replace	es ds a previously f	iled claim dated 10-19-06
Basis for Claim Goods sold Services performed Money loaned Personal injury/wrongful death Taxes Other See Exhibit A		Wages sala Last four d Unpaid cor	aries and compenigits of your SS #	rvices performed
	3	YC		
2 Date debt was incurred 5-2-05, 8-33-05	3	11 court juagm	ent, date obtaine	ea
4 Classification of Claim Check the appropriate box or boxes to See reverse side for important explanations Unsecured Nonpriority Claim \$ ////	which is or in 180 tors *Ama a)(5)	Check this a right of setofic Real E. Value of C. Amount of arressecured claim of the secured claim of the secured claim of the secured claim of the secured secured claim of the secured claim of the secured claim of the secured claim of the secured could be secured. The secured could be secured to secure the secured could be secured to secure the secured could be secured.	s box if your claim f) cription of Collate Estate Moto Collateral \$_\text{\texicr{\text{\text{\texi}\text{\text{\t	ars secured by collateral (including trail or Vehicle Other————————————————————————————————————
6 Credits The amount of all payments on this claim has been making this proof of claim	n credited an	d deducted for th	e purpose of	THIS SPACE IS FOR COURT USE ONLY
 Supporting Documents Attach copies of supporting documents orders invoices itemized statements of running accounts contragreements and evidence of perfection of lien DO NOT SEN documents are not available explain If the documents are voluments are not available explain if the document of the faddressed envelope and copy of this proof of claim 	acts court ju ND ORIGIN, iminous, atta iling of your	dgments mortga AL DOCUMEN' ch a summary claim enclose a	ages security TS If the stamped self-	FILED JAN 11 2007
Date Sign and print the name and title if any of file this claim (attach copy of power of atto	the creditor or orney, if any)	or other person a	uthorized to	ILLU OTTIT
1-10-07) Twe hulle	ر ک	Fere M.	ller	USA CMC

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y y y y y y y y y y y y y y y y y y y	PRO	OOF OF CLAIM	100.00 T ug	JC 4 01 0
Name of Debtor	Case No	ımher		
			1	
L'- A COMMERCIAL MORTERGE		-10725-LBR		
NOTE See Reverse for List of Debtors and Case Nur This form should not be used to make a claim for an air		Check box if you are] 	
arising after the commencement of the case. A "reque	st" for payment of an	aware that anyone else has filed a proof of claim relating		
Name of Creditor and Address	2 C 8 203	to your claim Attach copy of statement giving particulars		
)	11321241002864	statement giving particulars)	
SERGIO MOLINA AND IRENE SCHM		L Check box if you have never received any notices	 	
12150 S DART RD		from the bankruptcy court or BMC Group in this case		S PROOF OF CLAIM FOR A EST IN A BORROWER THAT IS NOT
PO BOX 859 MOLALLA OR 97038-0859		Check box if this address	ONE OF THE DEB	
		differs from the address on the		ady filed a proof of claim with the r BMC you do not need to file again
Creditor Telephone Number (563) 3/3 - 1455		envelope sent to you by the court		IS FOR COURT USE ONLY
Last four digits of account or other number by which cr	editor identifies debtor:	Chack hara	200	
	BUNDY CANYON)	Check here I replace or if this claim amen	a previously f	filed claim dated
1 BASIS FOR CLAIM		benefits as defined in 11 U S	C § 1114(a)	Unremitted principal
Goods sold Personal injury/wror Services performed Taxes	wages	salaries and compensation (fill out below)	Other claims against servicei (not for loan balances)
Money loaned Other (describe brie	6. .)	r digits of your SS #		(not ion round buildings)
Worldy loaned	Unpaid	compensation for services per	mormed from _	(date) to
2 DATE DEBT WAS INCURRED 8/24	2005 3 IF C	OURT JUDGMENT, DATE O	BTAINED	(date)
4 CLASSIFICATION OF CLAIM Check the appropriate	box or boxes that best desc	ribe your claim and state the amou	unt of the claim at the	e time case filed
See reverse side for important explanations UNSECURED NONPRIORITY CLAIM \$		SECURED CLAIM		
Check this box if a) there is no collateral or lien securing	your claim or b) your claim	<i></i> ~	our claim is secure	ed by collateral (including
exceeds the value of the property securing it or if c) nor entitled to priority		a right of setoff)	a allata ani	
UNSECURED PRIORITY CLAIM		Brief description of Real Estate		TI 04
Check this box if you have an unsecured claim all or pa	rt of which is		Motor vehicle	☐ Other
entitled to priority Amount entitled to priority \$		Value of Collateral	3	·
Specify the priority of the claim		secured claim if any		at time case filed included in
Domestic support obligations under 11 U S C § 507(a)(1)(A) or (a)(1)(B)	Up to \$2 225* of deposits toward	erd nurchase lease	or rental of property or
Wages salaries or commissions (up to \$10 000)* earn		services for personal family of		
before filing of the bankruptcy petition or cessation of the business whichever is earlier 11 U S C § 507(a)(4)	e debtor's	Taxes or penalties owed to go		
Contributions to an employee benefit plan 11 USC §	507(a)(5)	Other Specify applicable para * Amounts are subject to adjust		* \.\\.
		with respect to cases commen	ced on or after the d	late of adjustment
5 TOTAL AMOUNT OF CLAIM \$ AT TIME CASE FILED	\$ <i>50</i>	,000.2 \$		\$ 50,000 E
(unsecu	• •	secured)	(pnonty)	(Total)
Check this box if claim includes interest or other charg	es in addition to the principal	amount of the claim. Attach ite	mized statement of	all interest or additional charges
6 CREDITS The amount of all payments on this cla				
7 SUPPORTING DOCUMENTS Attach copies of running accounts contracts court judgments mort	<i>supporting documents,</i> s gages, secunty agreemen	uch as promissory notes, pure ts_and evidence of perfection	chase orders invol of lien DO NOT	ices itemized statements of SEND ORIGINAL
DOCUMENTS If the documents are not available	explain If the documents	s are voluminous attach a sur	mmary	
8 DATE-STAMPED COPY To receive an acknown proof of claim		<u> </u>		
The original of this completed proof of claim for ACCEPTED) so that it is actually received on or	m must be sent by mail before 5 00 pm, prevaili	or hand delivered (FAXES N ng Pacific time, on Novembo	IOT er 13, 2006	THIS SPACE FOR COURT USE ONLY
for each person or entity (including individuals,				1" 1 <u> </u>
governmental units) BY MALL TO		OR OVERNIGHT DELIVERY TO	, }	" ={- ₋ "
BMC Group Attn USACM Claims Docketing Center	BMC Gro Attn US	oup ACM Claims Docketing Cente	_r	NUV 10 2006
P O Box 911 El Segundo CA 90245-0911	1330 Ea:	st Franklin Avenue	, }	
		of the person authorized to file		USA CMC
	y of power of attorney if any)	Mu V		((a) () (a) a (a (a)) (a a (a))
SERGIO MOLIA	JA .	TREME SCHMUKE	R ,	1072501211

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA	PRO	OOF OF CLAIM		
Name of Debtor	Case Nu	ımber	1	
BUNDY CANYON			1	
USA Commercial Mortgue Co.	<u> </u>			
NOTE See Reverse for List of Debtors and Case/Numbers This form should not be used to make a claim for an administrative ex		Check box if you are		
larising after the commencement of the case. A request for payment administrative expense may be filed pursuant to 11 U.S.C. § 503	t of an	aware that anyone else has filed a proof of claim relating to		
Name of Creditor and Address		your claim Attach copy of statement giving particulars	Ì	
Profest Sharing Dean 2/10/1.		Check box if you have		
Prot & Charing Plan 2/20/2	3	never received any notices from the bankruptcy court or	DO NOT FILE THIS PROOF OF CLAIM FOR A	
my significant		BMC Group in this case	SECURED INTEREST IN A BORROWER THAT IS ONE OF THE DEBTORS	NOT
		Check box if this address differs from the address on the envelope sent to you by the	If you have already filed a proof of claim with the Bankruptcy Court or BMC you do not need to file a	
Creditor Telephone Number (\$18- 325 - 0600		court	THIS SPACE IS FOR COURT USE ONL	-
Last four digits of account or other number by which creditor identifies	s debtor	Check here replain replain ame	r a previously filed claim dated	_
1 BASIS FOR CLAIM	Retiree	benefits as defined in 11 U S	C § 1114(a) Unremitted principal	· · · · · ·
Goods sold Personal injury/wrongful death	Wages	salaries and compensation	(fill out below) Other claims against sei (not for loan balances)	rvicer
Services performed Taxes Money loaned Other (desgribe briefly)		r digits of your SS#	-	
World Guerra (despine briefly)	Unpaid (compensation for services p	(date) (date)	_
2 DATE DEBT WAS INCURRED 1/28/05		OURT JUDGMENT, DATE	OBTAINED	
4 CLASSIFICATION OF CLAIM Check the appropriate box or boxes to See reverse side for important explanations	at best descr	be your dam and state the am	ount of the claim at the time case filed	
UNSECURED NONPRIORITY CLAIM \$		SECURED CLAIM	our claim is secured by collateral (including	
Check this box if a) there is no collateral or lien securing your claim or exceeds the value of the property securing it or if c) none or only part of		a right of setoff)	our dain is secured by conaterar (including	
entitled to priority UNSECURED PRIORITY CLAIM	-	Brief description of	<u></u>	
Check this box if you have an unsecured claim all or part of which is		Real Estate		
entitled to priority Amount entitled to priority \$		Value of Collatera	· —————	
Specify the priority of the claim		secured claim if any	ind other charges at time case filed included in \$ \$ \(\begin{align*} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1
Domestic support obligations under 11 U S C § 507(a)(1)(A) or (a)(1)(B)			vard purchase lease or rental of property or	
Wages salaries or commissions (up to \$10 000) earned within 180 day before filing of the bankruptcy petition or cessation of the debtor's	ys _	_ ` `	or household use 11 U S C § 507(a)(7) pvernmental units 11 U S C § 507(a)(8)	
business whichever is earlier 11 U.S.C. § 507(a)(4)		-	ragraph of 11 U S C § 507(a) ()	
Contributions to an employee benefit plan 11 USC § 507(a)(5)			istment on 4/1/07 and every 3 years thereafter inced on or after the date of adjustment	
5 TOTAL AMOUNT OF CLAIM \$ 10,000.00 \$	100	000 00 \$	\$ 160,000 00	,
(unsecured)	F (secured)	(priority) (Total)	
Check this box if claim includes interest or other charges in addition to				es
6 CREDITS The amount of all payments on this claim has been or SUPPORTING DOCUMENTS Attach copies of supporting do				;
running accounts contracts court judgments mortgages security	/ agreement	ts and evidence of perfectio	n of lien DO NOT SEND ORIGINAL	
DOCUMENTS If the documents are not available explain If the 8 DATE-STAMPED COPY To receive an acknowledgment of			•	
proof of claim				
The original of this completed proof of claim form must be se ACCEPTED) so that it is actually received on or before 5 00 p				रा
for each person or entity (including individuals partnerships governmental units)	corporatio	ons, joint vent ires husts a	nd	
BY MAIL TO BMC Group	BY HAND B C Gro	OR OVERNIGHT DELIVERY T)	
Attn USAČN Giain's Docket ru Green		ACM C aims Docket ng Ceni at Franklin Avenue	er	
FI Segundo GA 9∪∠45 091	El &≈gun	do CA 90245	FI 50 OCT 19	วกก
DATE SIGN and print the name and trie if any of this claim tatta neopy if power of an		s outer person authorized to file	Fig. 1, 001 ± 3 1	
July of Marie	T	ust ee	USA CMC	ı
Penalty for presenting fraudulent claim is a fine of up to \$500 000 or imprisonn	nent for up to	5 years or both 18 USC §§	152 AND 3571	